

District of Columbia Education and Youth Development Plan - Stakeholder Survey

RETURN TO: Deputy Mayor for Education (EYD Plan Survey)

John A Wilson Building, 1350 Pennsylvania Ave, Suite 303, Washington, DC 20004 * FAX: (202) 727-0246

This survey has been designed to get the conversation started around what should be included within the Education and Youth Development (EYD) Plan and to tie together the many ongoing discussions already occurring around issues relating to children and youth in the District of Columbia. For more information about the EYD Plan please visit the website of the Deputy Mayor for Education at www.dme.dc.gov.

This survey should take no more than 5 minutes of your time.

Thank you in advance for your participation!

1. Which categories best describe you? (please select all that apply)

- ☐ Parent
- ☐ Student/young person
- ☐ Teacher
- ☐ School leader
- ☐ Member of the business community
- ☐ Child/youth community-based organization employee
- ☐ District government employee
- ☐ Social service provider
- ☐ Medical care/mental health care provider
- ☐ District Resident
- ☐ Other (please specify) _____

2. If you are a parent of school-aged children currently enrolled in a school in the District of Columbia, student, teacher, school leader, or service provider, tell us a little more about your children or the children you work with. (please select all that apply by filling in the appropriate boxes)

	Parent	Student	Teacher	School Leader	Service Provider
DCPS Pre-K	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
DCPS Elementary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
DCPS Middle School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
DCPS High School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Charter Pre-K	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Charter Elementary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Charter Middle School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Public Charter High School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Private Pre-K	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Private Elementary	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Private Middle School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Private High School	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

3. I am a resident of Ward:

- ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ Not a resident of the District

4. If you are an educator or service/healthcare provider, please tell us which ward(s) you serve. (select all that apply)

- ☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8

5. How do you typically learn about news relating to schools and youth? (select all that apply)

- ☐ School newsletter ☐ Email ☐ Mail ☐ Newspaper ☐ Online ☐ Advisory Neighborhood Council ☐ Other

PLEASE RETURN COMPLETED FORMS TO THE ADDRESS ABOVE (BY MAIL OR FAX)

BY FRIDAY, MAY 21ST

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There are many important issues within education and youth development. These initial priority areas have been distilled from the *Mayor's Six Citywide Goals for Children and Youth*, in order to help get the conversations started around the EYD Plan. Input gathered from this survey will assist in prioritizing these and determining if there are other areas that should be added to the discussion.

These groupings do not mean that any topics or subtopics will not be discussed later on; this is simply a way to be as inclusive as possible while maintaining a relatively short list. If you feel there is an issue that has been left off this list or does not fall under one of these priorities, please feel free to add it at the bottom under "Other".

A few of the broader categories explained further:

In-school time	(i.e. teacher quality and teacher support, curriculum, course offerings)
Out-of-school time	(i.e. before and afterschool programs, recreation programs, tutoring opportunities)
Alternative Education	(i.e. overage/under credited students, homeless youth, pregnant and parenting youth, incarcerated youth, children/youth in foster care)
Adult education & workforce development	(i.e. adult literacy, youth employment and internship opportunities, career counseling)
Health/safety of children and youth	(i.e. social/emotional supports in schools, healthcare for children and youth, mental healthcare, childhood obesity, disease prevention and treatment)

5. Please rank the following from 1-5 with "1" being that which you feel is most important.

For the priority areas that you choose to rank, please also tell us a little more about why you feel this should be addressed by selecting a corresponding letter from the choices below.

Priority Area	Rank	Reason This Needs to be Addressed
Early Childhood/Pre-K education	_____	_____
In-School time	_____	_____
Out-of-school time	_____	_____
Alternative Education	_____	_____
Linking K-12 to higher education	_____	_____
Adult education & workforce development	_____	_____
Health/safety of children and youth	_____	_____
Needs of special education children/students	_____	_____
Needs of ESL/ELL children/students	_____	_____
Disconnected youth	_____	_____
Parent/community engagement with schools	_____	_____
School facilities	_____	_____
Other: _____	_____	_____

Reasons that the priority area should be addressed:

- | | |
|---|--|
| A More emphasis is needed | G Quality of services |
| B Not enough funding | H Duplication of services |
| C Greater volume/number of services needed | I Coordination and alignment among providers/ agencies |
| D Need for more appropriate staffing (ratio/quality) | J Communication about this area needs to be greater/improve |
| E Accessibility of services | K Other (please specify) _____ |

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F Location of services

5. What are ways in which you would be willing to participate in the development of the EYD Plan? (select all that apply)

- ☐ Interview ☐ Focus group ☐ Town hall ☐ Provide written feedback on the EYD Plan once it is drafted ☐ I do not wish to participate further

5. If you would like to be kept updated about the progress of the EYD Plan, how would you like to receive information? (select all that apply)

- ☐ Email ☐ Mail ☐ Phone ☐ Updates to the Deputy Mayor's website ☐ I do not wish to be contacted

If you would like to receive additional information or participate in future discussions around the development of the EYD Plan, please provide your contact information below.

(please include your name and at least one way to contact you)

First Name

Last Name

Organization/Affiliation:

Address:

Address 2:

City/Town:

State:

ZIP:

Phone Number: ()

Email: _____@_____

Please feel free to share any additional questions, concerns, or feedback you may have.

Thank you for your thoughtful comments and feedback!

Please see our website for additional information and updates:

www.dme.dc.gov

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